

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE
							APPLICANT(S)	
<b>CLAIMS</b>								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.	*	*
1							51	/
2							52	/
3							53	/
4							54	/
5							55	/
6							56	/
7							57	/
8							58	/
9							59	/
10							60	/
11							61	/
12							62	/
13							63	/
14							64	/
15							65	/
16							66	/
17							67	/
18							68	/
19							69	/
20							70	/
21							71	/
22							72	/
23							73	/
24							74	/
25							75	/
26							76	/
27							77	/
28							78	
29							79	
30							80	
31							81	
32	/						82	
33		/					83	
34		/					84	
35		/					85	
36		/					86	
37		/					87	
38		/					88	
39		/					89	
40		/					90	
41		/					91	
42		/					92	
43		/					93	
44	/						94	
45		/					95	
46		/					96	
47		/					97	
48		/					98	
49		/					99	
50		/					100	
TOTAL IND.		↓		↓		↓	TOTAL IND.	4
TOTAL DEP.		↓		↓		↓	TOTAL DEP.	42
TOTAL CLAIMS							TOTAL CLAIMS	46
* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS								